

MISSOURI DEPARTMENT OF MENTAL HEALTH
Division of Comprehensive Psychiatric Services
OFFICIAL MEMORANDUM

February 5, 2010

TO: All Community Psychiatric Rehabilitation Providers

FROM: Tom Rehak, Coordinator of Policy and Programs
Division of Comprehensive Psychiatric Services

SUBJECT: Metabolic Syndrome Screening

Effective January 1, 2010, all Community Psychiatric Rehabilitation (CPR) programs must conduct an annual screening of risk factors for metabolic syndrome for all adults and children receiving antipsychotic medication.

DMH and the MO HealthNet division have been collaborating on a series of initiatives involving disease management (DMH NET), to improve the health of persons with serious mental illnesses and reduce health care costs. We have facilitated hiring nurses for most of the providers to help implement these initiatives. The most recent initiative is to screen for metabolic syndrome, which is a combination of medical disorders that greatly increase the risk of developing cardiovascular disease and diabetes, specifically: obesity, hypertension, lipid level, and blood glucose and/or HgbA1c. This is a high priority for this particular population since studies show persons with serious mental illness die 20-25 years earlier than others. Often the causes of death are related to cardiovascular disease and diabetes.

A form has been developed, the Metabolic Syndrome Screening and Monitoring Tool, which must be completed by a nurse (either an RN or LPN), to verify that the metabolic syndrome screening is completed. The form is attached. The form will also be posted on the DMH web. Providers may use this form, or develop their own form, so long as the content is consistent. If a provider chooses to develop their own recording form this must be approved by the Department.

Completing the screening may involve direct time spent by the nurse with the recipient, phone calls and referrals to physicians and labs, and indirect time completing the form. It is our expectation that the nurse will take the vital signs, obtain data required for a BMI, measure weight circumference, and then verify the lipid level, and blood glucose and/or HgbA1c, in one of the following ways:

- The nurse or other qualified staff may conduct the lab tests to assess lipid level and blood glucose levels and/or HgbA1c by using the Cholestech LDX analyzer or other machine approved by the Department. Funding for the Cholestech LDX analyzer is available per agency request.

- The nurse may arrange for and coordinate lab tests from a health care provider to assess lipid level and blood glucose levels and/or HgbA1c.
- The nurse may obtain results of recently completed lipid panel and blood glucose levels and/or HgbA1c from other health care providers. If obtaining the results of recently completed lab tests from a health care provider, the tests must have been completed no more than ninety (90) days prior to the screening.

We estimate that the activities involved in this screening will average about 30 minutes per client. We will be reimbursing providers \$35.38 for this screening, which is the equivalent of 30 minutes of our current flat rate for nursing services. We intend to monitor and evaluate this new service and the time spent conducting the screening to determine the appropriateness of the time assumption and rate. The service will be billable to both MO HealthNet and the DMH POS system, based on the Medicaid eligibility status of the client.

The complete service definition and requirements is included as Attachment A of this memorandum.

ATTACHMENT A

Service Title: Metabolic Syndrome Screening

Service Definition: Assuring that clients are screened annually for the following risk factors: obesity, hypertension, hyperlipidemia, and diabetes. Specific activities may include but are not limited to the following:

- Taking and recording of vital signs.
- Conducting lab tests to assess lipid level and blood glucose levels and/or HgbA1c. If the lab tests are conducted by the nurse, they must use the Cholestech LDX analyzer or other machine approved by the Department.
- Arranging for and coordinating lab tests to assess lipid level and blood glucose levels and/or HgbA1c.
- Obtaining results of lab tests to assess lipid levels and blood glucose levels and/or HgbA1c. If obtaining the results of lab tests from a health care provider, the tests must have been completed no more than ninety (90) days prior to the screening.
- Recording the results of all required vital signs and lab tests on the Metabolic Syndrome Screening and Monitoring Tool.

Eligible Provider/Rate/Billing Code: A registered nurse (RN) or a licensed practical nurse (LPN), licensed in the state of Missouri. The MHD billing rate will be \$39.98, and the POS contract rate and provider pay rate will be \$35.38.

- Metabolic Screening-RN MHD Code: H2010TD POS Code: H2010R
- Metabolic Screening-LPN MHD Code: H2010TE POS Code: H2010L

Target Population: Adults and children enrolled in the Community Psychiatric Rehabilitation (CPR) program. The screening will be required for these individuals who are receiving an antipsychotic medication, and will be optional for all others in the target population.

Documentation Requirements: Completion of the “Metabolic Syndrome Screening and Monitoring Tool”, and a summary progress note verifying the completion of the screening and the plans for ongoing monitoring of the individual based on the results of the screening. Both must be filed in the client record and available for review and verification by Department and other authorized staff.

Edits/Limitations: Payment for the screening is limited to one annually per recipient. MO HealthNet payment system edits will be set at 335 days. In order to bill this service the provider must complete the Metabolic Syndrome Screening and Monitoring Tool or a preapproved form with the required data fields.